CALUMET HOMESTEAD REHABILITATION CENTER

1712 MONROE STREET

NEW HOLSTEIN 53061 Phone: (920) 898-4296		Ownership:	County
Operated from 1/1 To 12/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/05):	90	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/05):	90	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/05:	89	Average Daily Census:	84

Age, Gender, and Primary Diagnosis	of Residents (12/	31/05)		Length of Stay (12/31/05)	%
Primary Diagnosis	<b>%</b>	Age Groups 	8	Less Than 1 Year 1 - 4 Years	41.6 36.0
Developmental Disabilities	1.1	Under 65	9.0	More Than 4 Years	22.5
Mental Illness (Org./Psy)	33.7	65 - 74	9.0		
Mental Illness (Other)	1.1	75 - 84	22.5		100.0
Alcohol & Other Drug Abuse	0.0	85 - 94	52.8		
Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.7	Full-Time Equivalent	
Cancer	4.5			Nursing Staff per 100 Resid	lents
Fractures	2.2	İ	100.0	(12/31/05)	
Cardiovascular	15.7	65 & Over	91.0		
Cerebrovascular	12.4			RNs	10.3
Diabetes	2.2	Gender	8	LPNs	8.7
Respiratory	3.4			Nursing Assistants,	
Other Medical Conditions	23.6	Male	30.3	Aides, & Orderlies	40.2
		Female	69.7		
	100.0	j			
		İ	100.0		

## Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other			Private Pay	!		amily Care			anaged Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	15	100.0	347	56	93.3	117	1	100.0	135	13	100.0	163	0	0.0	0	0	0.0	0	85	95.5
Intermediate				4	6.7	97	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	4.5
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	15	100.0		60	100.0		1	100.0		13	100.0		0	0.0		0	0.0		89	100.0

CALUMET HOMESTEAD REHABILITATION CENTER

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/05
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	6.1	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	11.1	Bathing	0.0		89.9	10.1	89
Other Nursing Homes	2.0	Dressing	4.5		91.0	4.5	89
Acute Care Hospitals	73.7	Transferring	14.6		80.9	4.5	89
Psych. HospMR/DD Facilities	0.0	Toilet Use	7.9		87.6	4.5	89
Rehabilitation Hospitals	0.0	Eating	43.8		49.4	6.7	89
Other Locations	0.0	******	******	*****	*****	******	*****
Total Number of Admissions	99	Continence		8	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	2.2	Receiving Resp	iratory Care	14.6
Private Home/No Home Health	12.9	Occ/Freq. Incontiner	nt of Bladder	57.3	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	28.0	Occ/Freq. Incontine	nt of Bowel	14.6	Receiving Suct	ioning	0.0
Other Nursing Homes	1.1	į			Receiving Osto	my Care	1.1
Acute Care Hospitals	15.1	Mobility			Receiving Tube	Feeding	1.1
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Mech	anically Altered Diets	23.6
Rehabilitation Hospitals	0.0	į -			_	-	
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	40.9	With Pressure Sores		3.4	Have Advance D	irectives	97.8
Total Number of Discharges		With Rashes		1.1	Medications		
(Including Deaths)	93					hoactive Drugs	22.5

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

************	*****	*****	*****	*****	*****	*****	*****	*****	*****
		Owne	ership:		Size:		ensure:		
	This	Gove	ernment	50	-99	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	8	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	85.2	91.9	0.93	86.3	0.99	88.8	0.96	88.1	0.97
Current Residents from In-County	59.6	84.8	0.70	80.0	0.74	83.2	0.72	77.6	0.77
Admissions from In-County, Still Residing	20.2	27.4	0.74	18.8	1.07	18.7	1.08	18.1	1.11
Admissions/Average Daily Census	117.9	87.7	1.34	180.5	0.65	177.7	0.66	162.3	0.73
Discharges/Average Daily Census	110.7	91.8	1.21	178.7	0.62	179.2	0.62	165.1	0.67
Discharges To Private Residence/Average Daily Census	45.2	36.0	1.26	87.1	0.52	83.4	0.54	74.8	0.60
Residents Receiving Skilled Care	95.5	91.9	1.04	96.4	0.99	96.3	0.99	92.1	1.04
Residents Aged 65 and Older	91.0	83.3	1.09	93.5	0.97	91.3	1.00	88.4	1.03
Title 19 (Medicaid) Funded Residents	67.4	72.9	0.92	59.0	1.14	61.8	1.09	65.3	1.03
Private Pay Funded Residents	14.6	18.0	0.81	24.5	0.60	22.5	0.65	20.2	0.72
Developmentally Disabled Residents	1.1	2.7	0.42	0.8	1.33	1.1	1.02	5.0	0.23
Mentally Ill Residents	34.8	53.7	0.65	31.6	1.10	34.8	1.00	32.9	1.06
General Medical Service Residents	23.6	17.9	1.32	26.1	0.90	23.0	1.02	22.8	1.04
Impaired ADL (Mean)	46.1	48.8	0.94	47.8	0.96	48.4	0.95	49.2	0.94
Psychological Problems	22.5	63.4	0.35	57.6	0.39	59.5	0.38	58.5	0.38
Nursing Care Required (Mean)	5.6	8.0	0.71	7.0	0.80	7.2	0.78	7.4	0.76